Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) **NUMBER FILED FOR NUMBER EXTRA** RATE FEE **RATE** FEE **BASIC FEE** ,383 (37 CFR 1.16(a)) OR **TOTAL CLAIMS** minus 20 =(37 CFR 1.16(c)) X \$ **OR** X \$ INDEPENDENT CLAIMS minus 3 =(37 CFR 1.16(b)) OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL **OR** TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) **SMALL ENTITY** SMALL ENTITY **CLAIMS** HIGHEST REMAINING **PRESENT** NUMBER RATE ADDI-RATE ADDI-ENT **EXTRA** AFTER **PREVIOUSLY** TIONAL TIONAL **AMENDMENT** PAID FOR FEE FEE ENDMI Minus = Total (37 CFR 1.16(c)) X \$ OR X \$_ Independent Minus = (37 CFR 1.16(b)) X \$ OR M FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ +\$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ϖ PRESENT REMAINING NUMBER **RATE** ADDI-RATE ADDI-ENT **EXTRA** AFTER **PREVIOUSLY** TIONAL TIONAL **AMENDMENT** PAID FOR FEE FEE ENDMI Minus Total == (37 CFR 1.16(c)) X \$ OR X \$_ Independent Minus = (37 CFR 1.16(b)) X \$ OR X \$ \triangleleft FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR. TOTAL TOTAL ADD'L FEE OR ADD'L FEE

		(Column 1)		(Column 2)	(Column 3)	
ENDMENT C		CLAIMS REMAINING AFTER AMELITAMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	7 rital (37 CFR 1.16(c))		Minus	4-	=	
	Independent (37 CFR 1.16(b))		Minus	444	=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
x \$=		OR	X \$=	
x \$=		OR	x \$=	
+\$=		OR	+ \$=	
TOTAL 7DO'L FEE		OR	TOTAL ADD'L I EE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete,

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